

## State of New Hampshire 2005 ANNUAL REPORT

The following information shall be given as of January 1 preceeding the due date Pursuant to RSA 293-A:16.22. REPORT DUE BY April 1, 2005

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE WILL BE ASSESSED A LATE FEE.

Filed

Date Filed: 02/23/2005 Business ID: 143147 William M. Gardner Secretary of State

THE TAMPOSI-NASH REAL ESTATE GROUP, INC.		ADDRESS OF PRINCIPAL OFFICE:	
400	AMHERST ST	400 AMHERST ST	
NA	SHUA , NH 03063	NASHUA , NH 03063	
	ENTITY TYPE: CORPORATION  BUSINESS ID: 143147  STATE OF DOMICILE: NEW HAMPSHIRE	REGISTERED AGENT AND OFFICE: HEIDI J. BARRET-KITCHEN ESQ	
	FEDERAL ID: 020432955	244 NORTH MAIN ST	
	DEAL IN REAL ESTATE	CONCORD , NH 03301	
2	If changing the mailing or principal office address, please of the new mailing address  The new principal office address	check the appropriate box and fill in the necessary information.	
PO Box is acceptable.			
3	NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).  (MUST LIST AT LEAST ONE OFFICER BELOW)  NAME  WILLIAM J. LURY  STREET  CITY/STATE/ZIP  NAME  NAMES AND ADDRESSES OF ADDITIONAL O	BOARD OF DIRECTORS  NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).  (MUST LIST AT LEAST ONE DIRECTOR BELOW)  NAME  WILLIAM 1 114875  STREET 400 ANN he 34 54  CITY/STATE/ZIP NOShua NH 03063  NAME  STREET 91 ANN he 31 54  CITY/STATE/ZIP NOShua NH 03064  NAME 1200 A NOSH  STREET 40 Temple 54  CITY/STATE/ZIP NOShua NH 03060  NAME 500 A Tampooly JC  STREET 20 Vafalor Sq Ste 603  CITY/STATE/ZIP NOSHUA NH 03063	
4	I, the undersigned do hereby Certify that the statements on this  Sign here:  Please print name and title of signer:  NAME William	other person authorized by the board of directors. report are rue to the best of my information, knowledge and belief  President  TITLE	
3 8 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	FEE DUE: \$100.00 E-MAIL ADDRESS (OPTIONAL): bill@tamposi-nash.com		

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO SECRETARY OF STATE RETURN COMPLETED REPORT AND PAYMENT TO:

New Hampshire Department of State, Annual Reports, P.O. Box 9529, Manchester, NH 03108-9529